

PIEDMONT HEALTH DISTRICT
111 SOUTH ST., 1st FLR., FARMVILLE VA 23901 (434)392-3984

VIRGINIA DEPARTMENT OF HEALTH
APPLICATION FOR TEMPORARY RESTAURANT PERMIT
**TO BE SUBMITTED TO COUNTY HEALTH DEPARTMENT
AT LEAST 2 WEEKS [14 DAYS] PRIOR TO EVENT**
(PLEASE PRINT OR TYPE)

Date of Application: _____

Name of Organization or Individual: _____

FIN/SSN: _____

Mailing Address: _____

Representative: _____

Telephone numbers: (W) _____

(H) _____

Event Name: _____

Event Location: _____

Date(s) of Operation: _____

Time(s) _____ to _____

Type of Food Facility: _____

(Beverage Wagon, Booth, Kitchen, Tent, etc.)

Vendor Fee* = \$40 (include with application or include copy of receipt)

(Examples of organizations/groups exempt from fee = churches; fraternal, school and social organizations; and volunteer fire departments and rescue squads.)

Please provide the following information. Failure to provide the necessary information regarding your operation may delay the processing of your application.

Water Service _____ Sewage Disposal _____

Solid Waste Disposal _____ Liquid Waste Disposal _____

LIST ALL FOOD AND BEVERAGE ITEMS BELOW. Use separate page for additional information.

Food/Beverage	Source Address	Where prepared	Methods of preparation and serving equipment used
Example: Hamburgers Tomatoes & onion	Food Distributor Local Market	On site On site	Cooked to 170°F and held in pan on grill. Washed and sliced and held in cooler.

HAND WASHING METHODS	CONDIMENTS HOW SERVED	LIST ALL UTENSILS HOW CLEANED DESCR. SANITIZER	REFRIGERATION TYPE	LIST ALL COOKING EQUIPMENT Examples =
Example: Soap, water, towels	Prepackaged mustard, catsup, etc.	Tongs, spatula, knife, ice scoop (bleach and water sanitizer)	Reach-in refrigerator, Cooler with ice (thermometer in each)	Electric grill, steam table deep fat fryer, hot plate

*Please call us prior to the event to verify the status of your application. Please notify us of any changes in your application (for example, additional menu items)

CERTIFICATION

I have read the attached instructions, understand them, and will comply with their requirements. I understand that failure to comply may result in a permit not being issued or permit suspension, as per Food Regulations, adopted March 2002.

_____	_____
Representative's Signature	Date